## Case 17-26398 Doc 1 Filed 08/31/17 Entered 08/31/17 20:41:05 Desc Main Document Page 1 of 62

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)	Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	Chapter 13	☐ Check if this an amended filing

## Official Form 101

## Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1:	Identify Yourself		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	You	r full name		
	your pictu exan	e the name that is on government-issued ire identification (for nple, your driver's se or passport).	Kristin First name  M. Middle name	First name  Middle name
	Bring your picture identification to your meeting with the trustee.		Dean Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.		other names you have d in the last 8 years		
		de your married or len names.		
3.	your num Indiv	r the last 4 digits of Social Security ber or federal vidual Taxpayer tification number	xxx-xx-7605	

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Debtor 1 Kristin M. Dean

	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years  Include trade names and doing business as names	■ I have not used any business name or EINs.  Business name(s)	☐ I have not used any business name or EINs.  Business name(s)			
	EINs	EINs			
Where you live	10340 Minnick Ave.	If Debtor 2 lives at a different address:			
	Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		County			
	If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
	Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
Why you are choosing this district to file for bankruptcy	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one:  ☐ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			
	Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names  Where you live  Why you are choosing this district to file for	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years  Include trade names and doing business as names  Business name(s)  Business name(s)  EINs  ### 10340 Minnick Ave.  Oak Lawn, IL 60453  Number, Street, City, State & ZIP Code  Cook  County  If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.  Why you are choosing this district to file for bankruptcy  Why you are choosing this district to file for bankruptcy    Check one:			

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Case number (if known) Debtor 1 Kristin M. Dean

	The shorter of the				of analysis Alaking Demokratik	44 11 0 0 0 0 40/h) for Individuals Eller Con Dools	
7.	The chapter of the Bankruptcy Code you are choosing to file under				of each, see <i>Notice Required by</i> f page 1 and check the appropriate	11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy e box.	
	choosing to the under	☐ Chapter 7					
		□с	hapter 11				
		□с	hapter 12				
		<b>■</b> C	hapter 13				
8.	How you will pay the fee	•	about how yo	ս may pay. Ty <mark>ր</mark> attorney is sub	pically, if you are paying the fee yo	k with the clerk's office in your local court for more details urself, you may pay with cash, cashier's check, or money alf, your attorney may pay with a credit card or check with	
					stallments. If you choose this option ts (Official Form 103A).	n, sign and attach the Application for Individuals to Pay	
			but is not requapplies to you	uired to, waive or family size a	your fee, and may do so only if yound you are unable to pay the fee in	on only if you are filing for Chapter 7. By law, a judge may, ur income is less than 150% of the official poverty line that installments). If you choose this option, you must fill out	
			the Application	n to Have the (	Chapter / Filing Fee Waived (Offic	ial Form 103B) and file it with your petition.	
9.	Have you filed for bankruptcy within the	■ No					
	last 8 years?	□ Ye			\A/I <sub>0</sub> a.e.	Casa awakan	
			District			Case number	
			District		When When	Case number Case number	
			District		when	Case number	
10.	Are any bankruptcy cases pending or being	■ No	)				
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	□ Ye	es.				
			Debtor			Relationship to you	
			District		When	Case number, if known	
			Debtor			Relationship to you	
			District		When	Case number, if known	
11.	Do you rent your residence?	■ No	Go to li	ne 12.			
		□ Ye	es. Has yo	ur landlord obt	ained an eviction judgment against	t you and do you want to stay in your residence?	
				No. Go to line	12.		
				Yes. Fill out Inbankruptcy pe		Judgment Against You (Form 101A) and file it with this	

		Document	Paue 4 01 02	
Debtor 1	Kristin M. Dean		Case number (if known)	

ar	Report About Any Bu	sinesses `	You Own	as a Sole Propriet	or			
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.				
		☐ Yes.	Name	and location of bus	iness			
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	of business, if any				
	If you have more than one sole proprietorship, use a		Numb	er, Street, City, Stat	e & ZIP Code			
	separate sheet and attach it to this petition.		Check	the appropriate box	x to describe your business:			
	,				ess (as defined in 11 U.S.C. § 101(27A))			
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))			
				Stockbroker (as de	efined in 11 U.S.C. § 101(53A))			
				Commodity Broke	r (as defined in 11 U.S.C. § 101(6))			
				None of the above				
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines operation	e filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate s. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of hs, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure s.C. 1116(1)(B).					
	For a definition of small	No.	I am n	ot filing under Chap	ter 11.			
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am fi Code.	I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.				
		☐ Yes.	I am fi	ling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.			
Pari	t 4: Report if You Own or	Have Anv	Hazardo	us Property or Any	/ Property That Needs Immediate Attention			
	Do you own or have any			<u></u>	, reporty that record immodules accounts.			
14.	property that poses or is alleged to pose a threat of imminent and	■ No. □ Yes.	What is t	he hazard?				
	identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?			iate attention is why is it needed?				
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	the property?				
					Number, Street, City, State & Zip Code			

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Debtor 1 Kristin M. Dean

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 ☐ I am not required to receive a briefing about credit counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### □ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

#### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Den	Kristin W. Dean				Case Hullion	et (ii known)
Par	t 6: Answer These Quest	ions for Re	porting Purposes			
16.	What kind of debts do you have?	i	ndividual primarily for a pe			ined in 11 U.S.C. § 101(8) as "incurred by an
			□ No. Go to line 16b.			
			Yes. Go to line 17.	husinasa dahtaa Dusina		Ab at the time time of the abtain
			noney for a business or in			that you incurred to obtain siness or investment.
			☐ No. Go to line 16c.			
			☐ Yes. Go to line 17.			
		16c.	State the type of debts you	owe that are not consum	er debts or busine	ss debts
17.	Are you filing under Chapter 7?	■ No.	am not filing under Chapte	er 7. Go to line 18.		
	Do you estimate that after any exempt property is excluded and		am filing under Chapter 7 are paid that funds will be a			perty is excluded and administrative expenses?
	administrative expenses		□ No			
	are paid that funds will be available for distribution to unsecured creditors?		□ Yes			
18.	How many Creditors do	<b>1</b> -49		<b>1</b> ,000-5,000		□ 25,001-50,000
	you estimate that you owe?	□ 50-99		☐ 5001-10,000		☐ 50,001-100,000
		☐ 100-199 ☐ 200-999		□ 10,001-25,00	0	☐ More than100,000
19.	How much do you estimate your assets to	\$0 - \$50		□ \$1,000,001 - □ \$10,000,001		☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion
	be worth?	□ \$50,001 - \$100,000 □ \$100,001 - \$500,000		\$50,000,001		□ \$10,000,000,001 - \$50 billion
		□ \$500,00	01 - \$1 million	□ \$100,000,001	l - \$500 million	☐ More than \$50 billion
20.	How much do you	<b>\$0 - \$5</b>	0,000	□ \$1,000,001 -	\$10 million	□ \$500,000,001 - \$1 billion
	estimate your liabilities to be?		1 - \$100,000	□ \$10,000,001 · □ \$50,000,001 ·		□ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion
		_ ` ´	01 - \$500,000 01 - \$1 million	☐ \$100,000,001	•	☐ More than \$50 billion
Par	t 7: Sign Below					
	you	I have exa	mined this petition, and I d	eclare under penalty of pe	erjury that the infor	mation provided is true and correct.
						e, under Chapter 7, 11,12, or 13 of title 11, hoose to proceed under Chapter 7.
			ey represents me and I did I have obtained and read			ot an attorney to help me fill out this
		I request re	elief in accordance with the	e chapter of title 11, United	d States Code, spe	ecified in this petition.
		bankruptcy and 3571.	case can result in fines up			or property by fraud in connection with a years, or both. 18 U.S.C. §§ 152, 1341, 1519,
		Kristin M Signature			Signature of Debto	or 2
		Executed			Executed on	
			MM / DD / YYYY		MN	M / DD / YYYY

Debtor 1 Kristin M. Dean Page 7 of 62 Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Anna S	tanley Kahriman	Date	August 31, 2017	
Signature of	Attorney for Debtor		MM / DD / YYYY	
	nley Kahriman			
Printed name				
The Law C	Offices of Anna Stanley Kahrima	ın		
4544 W. 10	03rd St.			
Ste. 102				
Oak Lawn	, IL 60453			
	City, State & ZIP Code			
Contact phone	(708) 634-3474	Email address		
6287467				
Bar number & S	tate			

		Docume	eni Paue 8 01 02	
Fill in this infor	mation to identify your	case:		
Debtor 1	Kristin M. Dean			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if this is an amended filing

### Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your as Value o	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	59,676.60
	1c. Copy line 63, Total of all property on Schedule A/B	\$	59,676.60
Par	t 2: Summarize Your Liabilities		
			<b>abilities</b> t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	14,470.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	26,427.08
	Your total liabilities	\$	40,897.08
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	5,426.35
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	5,170.00
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	r other sch	nedules.
	■ Yes		

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

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8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form
	122A-1 Line 11; <b>OR</b> , Form 122B Line 11; <b>OR</b> , Form 122C-1 Line 14.

5,946.48 \$

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total claim	
From Fart 4 on Schedule E/F, copy the following.		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	0.00

		400 17 20000 1	Document	Page 10 of 62	17 20: 12:00	o wan
Fill in	this info	rmation to identify your	case and this filing:			
Debto	· 1	Kristin M. Dean				
<b>3</b> -64-	. 0	First Name	Middle Name	Last Name		
Debtoi Spouse	; if filing)	First Name	Middle Name	Last Name		
Jnited	States B	ankruptcy Court for the:	NORTHERN DISTRICT OF ILL	INOIS		
	Olatoo 2	arm aproy countries the				
Case r	number			_		☐ Check if this is an amended filing
Offic	cial Fo	orm 106A/B				
Sch	edu	le A/B: Prop	erty			12/15
nforma	tion. If mo every que ■	re space is needed, attach estion.	te as possible. If two married peop a separate sheet to this form. On t , Land, or Other Real Estate You O	he top of any additional pag		
Do y	ou own or	have any legal or equitable	interest in any residence, building	g, land, or similar property?		
■ N	o. Go to Pa	art 2.				
☐ Ye	es. Where	is the property?				
Part 2:	Decerib	e Your Vehicles				
			itable interest in any vehicles,			
Cars	0	rucks, tractors, sport ut	ility vehicles, motorcycles			
3.1	Make:	Toyota	Who has an interest in t	he property? Check one	Do not deduct secured clai	
	Model:	Highlander	Debtor 1 only		the amount of any secured Creditors Who Have Claim	
	Year:	2015	Debtor 2 only		Current value of the	Current value of the
		·	Debtor 1 and Debtor 2		entire property?	portion you own?
Г	Other info	rmation:	At least one of the deb	otors and another		
			Check if this is comm	nunity property	\$25,525.00	\$25,525.00
3.2	Make:	United	Who has an interest in t	he property? Check one	Do not deduct secured clai	
	Model:		Debtor 1 only		Creditors Who Have Claim	
	Year:	1946	Debtor 2 only		Current value of the	Current value of the
	Approxima Other info	ate mileage:	Debtor 1 and Debtor 2	•	entire property?	portion you own?
Г		railer - Debtor does n	At least one of the deb	tors and another		
	own RE		☐ Check if this is comm	nunity property	\$8,000.00	\$8,000.00
	nples: Bo		<b>IVs and other recreational veh</b> onal watercraft, fishing vessels, s			

☐ Yes

Case 17-26398 Doc 1 Filed 08/31/17 Entered 08/31/17 20:41:05 Desc Main Document Page 11 of 62 Case number (if known) Debtor 1 Kristin M. Dean 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$33,525.00 pages you have attached for Part 2. Write that number here......>> Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No Yes. Describe..... \$50.00 Kitchen table and chairs - purchased in 1999 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ☐ No Yes. Describe..... 1 TV - \$600 when purchased in 2010 4 iPhones - still paying for \$200.00 1 Macbook- estimated year of purchase - 2008 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ■ No ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... \$250.00 Regular used clothing 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver □ No Yes. Describe..... \$300.00 Vintage Diamond Anniversary Band

#### 13. Non-farm animals

Examples: Dogs, cats, birds, horses

No

☐ Yes. Describe.....

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Debtor	Kristin M. Dear	1		Case number (if known)	
<b>I</b>			u did not already list, i	ncluding any health aids you did not list	
	add the dollar value of a or Part 3. Write that nur			ny entries for pages you have attached	\$800.00
Part 4:	Describe Your Financial	Assets			
Do you	u own or have any lega	al or equitable inter	est in any of the follow	ving?	Current value of the portion you own? Do not deduct secured claims or exemptions.
<b>=</b> N	<i>xamples:</i> Money you hav			osit box, and on hand when you file your petition	on
	institutions. If y		al accounts; certificates counts with the same ins	of deposit; shares in credit unions, brokerage httitution, list each.	nouses, and other similar
<b>■</b> Y	Yes		Institution r	name:	
		17.1. Checking	Fifth Thir	d Bank	\$250.00
		17.2. Checking	Chase		\$16.60
		17.2. Checking 17.3. Checking	Chase Fifth Thir	rd Bank	\$16.60 \$85.00
Ex	onds, mutual funds, or paramples: Bond funds, inv	17.3. Checking	Fifth Thir		
Ex ■ N	onds, mutual funds, or paramples: Bond funds, inv	17.3. Checking	Fifth Thir		
Ex ■ N □ Y	ends, mutual funds, or particles: Bond funds, involves: Bond funds, involves: Bond funds, involves: Bond funds fun	17.3. Checking publicly traded storestment accounts we structure or in	Fifth Thir  cks  vith brokerage firms, more ssuer name:		\$85.00
Ex ■ N □ Y 19. No joi	ends, mutual funds, or particles: Bond funds, involves: Bond funds, involves: Bond funds, involves: Bond funds fun	17.3. Checking  publicly traded storestment accounts we structure or is and interests in in	Fifth Thir cks vith brokerage firms, more ssuer name:	ney market accounts	\$85.00
19. No joi	ends, mutual funds, or paramples: Bond funds, involves	publicly traded storestment accounts we institution or is and interests in ir nation about them Name of entity:  te bonds and other clude personal check are those you can	Fifth Thir  cks  with brokerage firms, more ssuer name:  ncorporated and unince  r negotiable and non-ness, cashiers' checks, pro	ney market accounts  orporated businesses, including an interes  % of ownership:	\$85.00
19. No joi	onds, mutual funds, or paramples: Bond funds, involves	publicly traded storestment accounts we institution or is and interests in ir nation about them Name of entity:  te bonds and other clude personal check are those you can	Fifth Thir  cks  with brokerage firms, more ssuer name:  ncorporated and unince  r negotiable and non-ness, cashiers' checks, pro	ney market accounts  orporated businesses, including an interes  % of ownership:  egotiable instruments missory notes, and money orders.	\$85.00
20. Go No	ands, mutual funds, or paramples: Bond funds, involves	publicly traded storestment accounts we Institution or is and interests in ir nation about them Name of entity:  te bonds and other clude personal check are those you can ation about them Issuer name:	Fifth Thir  cks  with brokerage firms, more ssuer name:  ncorporated and unince  r negotiable and non-ness, cashiers' checks, pro not transfer to someone	ney market accounts  orporated businesses, including an interes  % of ownership:  egotiable instruments missory notes, and money orders.	\$85.00
20. Go  No  No  No  No  No  No  No  No  No	ands, mutual funds, or paramples: Bond funds, involved fes	publicly traded storestment accounts we Institution or is and interests in innation about them Name of entity:  te bonds and other slude personal check are those you can ation about them Issuer name:  counts LERISA, Keogh, 40	Fifth Thir  cks  with brokerage firms, more ssuer name:  ncorporated and unince  r negotiable and non-ness, cashiers' checks, pro not transfer to someone	orporated businesses, including an interes  % of ownership:  egotiable instruments missory notes, and money orders. by signing or delivering them.	\$85.00

Official Form 106A/B Schedule A/B: Property page 3

Case 17-26398 Doc 1 Filed 08/31/17 Entered 08/31/17 20:41:05 Desc Main Document Page 13 of 62 Case number (if known) Debtor 1 Kristin M. Dean 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others Institution name or individual: ☐ Yes. ..... 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ■ No ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ☐ Yes. Give specific information about them... Current value of the Money or property owed to you? portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No

☐ Yes. Give specific information..

#### 31. Interests in insurance policies

Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

□ No

Yes. Name the insurance company of each policy and list its value.

Company name:

Beneficiary:

Surrender or refund value:

**Allstate Term Life Insurance Policy** 

daughters

\$0.00

#### 32. Any interest in property that is due you from someone who has died

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

■ No

		Case 17-26398	Doc 1	Filed 08/31/17 Document	Entered 0 Page 14 of	8/31/17 20:41:05 62	Desc Main
Deb	otor 1	Kristin M. Dean				Case number (if known)	
	☐ Yes.	Give specific information					
ı	<i>Exam</i> µ ■ No	s against third parties, whe bles: Accidents, employment Describe each claim				and for payment	
ı	No	contingent and unliquidate  Describe each claim	ed claims of e	very nature, includir	ng counterclaims	of the debtor and rights to	set off claims
ı	No	nancial assets you did not Give specific information	already list				
36.		the dollar value of all of your				ges you have attached	\$25,351.60
Part	t 5: De	scribe Any Business-Related I	Property You O	wn or Have an Interest	In. List any real esta	ate in Part 1.	
	No. Go	own or have any legal or equit o to Part 6. Go to line 38.	able interest in	any business-related	oroperty?		
Part		scribe Any Farm- and Comme ou own or have an interest in far			vn or Have an Intere	st In.	
46.	No.	Jown or have any legal or Go to Part 7. Go to line 47.	equitable inte	erest in any farm- or	commercial fishir	ng-related property?	
Part	t 7:	Describe All Property You C	wn or Have an	Interest in That You Di	d Not List Above		
	<i>Exam</i> µ ■ No	I have other property of an oles: Season tickets, country Give specific information	club members				
54.	Add t	the dollar value of all of yo	ur entries fro	m Part 7. Write that	number here		\$0.00
Part	t 8:	List the Totals of Each Part o	f this Form				
55.	Part 1	1: Total real estate, line 2 .					\$0.00
56.		2: Total vehicles, line 5			\$33,525.00		
57.		3: Total personal and hous		line 15	\$800.00		
58.		4: Total financial assets, lir			\$25,351.60		
59.		5: Total business-related p		<del></del>	\$0.00		
60.		6: Total farm- and fishing-r			\$0.00		
61. 62.		7: Total other property not personal property. Add line		_	\$0.00 \$59,676.60	Copy personal property to	otal <b>\$59,676.60</b>
		of all property on Schedul	· ·	_	Ψοσ,στοιοσ	2-F) F 2:00:10: Proporty (	\$59,676.60
		· · · ·					T ,

Official Form 106A/B Schedule A/B: Property page 5

Fill in this infor	mation to identify your	case:			
Debtor 1	Kristin M. Dean				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)				☐ Check if this is a amended filing	ın

## Official Form 106C

## Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1.	Which set of exemptions	are vou claiming	? Check one only	. even if vour s	pouse is filing with vol

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
2015 Toyota Highlander 21,000 miles Line from Schedule A/B: 3.1	\$25,525.00		\$2,400.00	735 ILCS 5/12-1001(c)
			100% of fair market value, up to any applicable statutory limit	
1946 United Travel trailer - Debtor does not own	\$8,000.00		\$4,000.00	735 ILCS 5/12-1001(b)
RE it is on Purchased for \$8,000 in 2010 Line from Schedule A/B: 3.2			100% of fair market value, up to any applicable statutory limit	
Regular used clothing Line from Schedule A/B: 11.1	\$250.00		\$250.00	735 ILCS 5/12-1001(a)
Line IIIIII Schedule A/B. 11.1			100% of fair market value, up to any applicable statutory limit	
401(k): Advocate Health Care Line from Schedule A/B: 21.1	\$25,000.00		\$25,000.00	735 ILCS 5/12-1006
Elite Helli Gelleddio FVD. 2111			100% of fair market value, up to any applicable statutory limit	

Filed 08/31/17 Entered 08/31/17 20:41:05 Document Page 16 of 62 Debtor 1 Kristin M. Dean Case number (if known) 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? No

Case 17-26398

Yes

Doc 1

Desc Main

Fill in this informati	on to identify you		ocument P	age 17	<i>VI V/</i>			
	Kristin M. Dean	Middle Name	e La	ast Name				
Debtor 2 (Spouse if, filing)	irst Name	Middle Name	e La	ast Name				
United States Bankru	ptcy Court for the	NORTHERN D	ISTRICT OF ILLING	DIS				
Case number(if known)							_	if this is an led filing
Official Form 1								
Schedule D:	Creditors	Who Have	e Claims Se	ecured	by Propert	y		12/15
Be as complete and acc s needed, copy the Ado number (if known).								
. Do any creditors hav	e claims secured b	y your property?						
□ No. Check this	s box and submit t	his form to the cour	t with your other sch	nedules. Yo	u have nothing else t	o report on	this form.	
Yes. Fill in all	of the information	below.			3			
		below.			J			
Part 1: List All Se	ecured Claims		d claim list the credito	r separately	Column A	Column B		Column C
	ns. If a creditor has than one creditor has	more than one secured a particular claim, list	t the other creditors in		Amount of claim Do not deduct the	Value of c	collateral	Unsecured portion
Part 1: List All Se  2. List all secured claim for each claim. If more	ecured Claims  ms. If a creditor has than one creditor has e claims in alphabeti	more than one secured s a particular claim, list cal order according to	t the other creditors in	Part 2. As	Amount of claim	Value of c that supp claim	collateral	Unsecured
List All Secured claim for each claim. If more much as possible, list the	ecured Claims  ms. If a creditor has than one creditor has e claims in alphabeti	more than one secured a particular claim, list cal order according to	t the other creditors in the creditor's name.	Part 2. As claim:	Amount of claim Do not deduct the value of collateral.	Value of c that supp claim	collateral orts this	Unsecured portion
List All Secured claim for each claim. If more much as possible, list the 2.1 Toyota Motor	ns. If a creditor has than one creditor has e claims in alphabet r Credit	more than one secured a particular claim, list cal order according to Describe the prope 2015 Toyota Himiles	t the other creditors in the creditor's name.	Part 2. As ´	Amount of claim Do not deduct the value of collateral.	Value of c that supp claim	collateral orts this	Unsecured portion
2. List all secured claim for each claim. If more much as possible, list the 2.1 Toyota Motor Creditor's Name	ms. If a creditor has than one creditor has e claims in alphabet r Credit  St Ste 420 L 60523	more than one secured a particular claim, list cal order according to  Describe the proper 2015 Toyota Himiles  As of the date you apply.	the other creditors in the creditor's name. erty that secures the ighlander 21,000	Part 2. As ´	Amount of claim Do not deduct the value of collateral.	Value of c that supp claim	collateral orts this	Unsecured portion
2. List all secured claim for each claim. If more much as possible, list the Toyota Motor Creditor's Name  1111 W 22nd Oak Brook, II	ms. If a creditor has than one creditor has e claims in alphabet or Credit  St Ste 420  60523  State & Zip Code	more than one secured a particular claim, list cal order according to  Describe the proper 2015 Toyota Himiles  As of the date you apply.  Contingent	the other creditors in the creditor's name.  erty that secures the dighlander 21,000  file, the claim is: Ched	Part 2. As ´	Amount of claim Do not deduct the value of collateral.	Value of c that supp claim	collateral orts this	Unsecured portion
List All Secured claim for each claim. If more much as possible, list the 2.1 Toyota Motol Creditor's Name  1111 W 22nd Oak Brook, II Number, Street, City  Who owes the debt?  Debtor 1 only	ms. If a creditor has than one creditor has e claims in alphabet or Credit  St Ste 420  60523  State & Zip Code	more than one secured a particular claim, list cal order according to Describe the prope 2015 Toyota Himiles  As of the date you apply.  Contingent Unliquidated Disputed Nature of lien. Che	the other creditors in the creditor's name.  erty that secures the dighlander 21,000  file, the claim is: Ched	Part 2. As Claim:	Amount of claim Do not deduct the value of collateral. \$14,470.00	Value of c that supp claim	collateral orts this	Unsecured portion
List All Secured claim for each claim. If more much as possible, list the 2.1 Toyota Motor Creditor's Name  1111 W 22nd Oak Brook, II  Number, Street, City  Who owes the debt?  Debtor 1 only  Debtor 2 only	ns. If a creditor has than one creditor has e claims in alphabet r Credit  St Ste 420 60523 State & Zip Code Check one.	more than one secured a particular claim, list cal order according to  Describe the proper 2015 Toyota Himiles  As of the date you apply.  Contingent Unliquidated Disputed Nature of lien. Che	the other creditors in the creditor's name.  erty that secures the dighlander 21,000  file, the claim is: Check all that apply.  but made (such as more	Part 2. As claim:	Amount of claim Do not deduct the value of collateral. \$14,470.00	Value of c that supp claim	collateral orts this	Unsecured portion
2. List all secured claim for each claim. If more much as possible, list the 2.1 Toyota Motor Creditor's Name  1111 W 22nd Oak Brook, II Number, Street, City  Who owes the debt?  Debtor 1 only Debtor 2 only Debtor 1 and Debtor	ns. If a creditor has than one creditor has e claims in alphabet r Credit  St Ste 420 60523 State & Zip Code Check one.	more than one secured a particular claim, list cal order according to  Describe the proper 2015 Toyota Himiles  As of the date you apply.  Contingent Unliquidated Disputed Nature of lien. Che An agreement you car loan)  Statutory lien (su	the other creditors in the creditor's name.  erty that secures the cighlander 21,000  file, the claim is: Check all that apply.  but made (such as mortulated as tax lien, mechanism and the content of t	Part 2. As claim:	Amount of claim Do not deduct the value of collateral. \$14,470.00	Value of c that supp claim	collateral orts this	Unsecured portion
List All Secured claim for each claim. If more much as possible, list the 2.1 Toyota Motor Creditor's Name  1111 W 22nd Oak Brook, II  Number, Street, City  Who owes the debt?  Debtor 1 only  Debtor 2 only	ns. If a creditor has than one creditor has e claims in alphabet r Credit  St Ste 420  60523  State & Zip Code  Check one.	more than one secured a particular claim, list cal order according to  Describe the proper 2015 Toyota Himiles  As of the date you apply.  Contingent Unliquidated Disputed Nature of lien. Che An agreement you car loan)  Statutory lien (su	the other creditors in the creditor's name.  erty that secures the cighlander 21,000  file, the claim is: Check  eck all that apply.  ou made (such as more uch as tax lien, mechanom a lawsuit	Part 2. As claim:	Amount of claim Do not deduct the value of collateral. \$14,470.00	Value of c that supp claim	collateral orts this	Unsecured portion
2. List all secured claim for each claim. If more much as possible, list the 2.1 Toyota Motol Creditor's Name  1111 W 22nd Oak Brook, II  Number, Street, City  Who owes the debt?  Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor  At least one of the decomposition of the decomposit	ns. If a creditor has than one creditor has e claims in alphabet r Credit  St Ste 420  60523  State & Zip Code  Check one.	more than one secured a particular claim, list cal order according to  Describe the prope 2015 Toyota Himiles  As of the date you apply.  Contingent Unliquidated Disputed Nature of lien. Che An agreement you car loan)  Statutory lien (su	the other creditors in the creditor's name.  erty that secures the cighlander 21,000  file, the claim is: Check  eck all that apply.  ou made (such as more uch as tax lien, mechanom a lawsuit	Part 2. As claim:	Amount of claim Do not deduct the value of collateral. \$14,470.00	Value of c that supp claim	collateral orts this	Unsecured portion

Add the dollar value of your entries in Column A on this page. Write that number here:

\$14,470.00

If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

\$14,470.00

#### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

C	ase 17-20590 L	Document	Page 18	8 of 62	.03 Des	Civialii
Fill in this info	rmation to identify your		I ddt. 1	70102		
Debtor 1	Kristin M. Dean					
	First Name	Middle Name	Last Name			
Debtor 2	E	ACT III AT				
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States B	ankruptcy Court for the:	NORTHERN DISTRICT OF I	LLINOIS			
Case number						
(if known)					☐ CI	neck if this is an
					ar	nended filing
Official Ear	m 106E/E					
Official For		/ha Haya Haasayra	d Claima			10/15
		/ho Have Unsecured se Part 1 for creditors with PRIOR		2. 4.0.6	DDIODITY . I. '	12/15
schedule D: Cred eft. Attach the Co ame and case n	litors Who Have Claims Secontinuation Page to this pagumber (if known).	ired Leases (Official Form 106G). ured by Property. If more space is ge. If you have no information to r	s needed, copy 1	the Part you need, fill it out, i	number the enti	ries in the boxes on the
	All of Your PRIORITY Un itors have priority unsecure					
_ ′	. ,	d claims against you?				
No. Go to	Part 2.					
☐ Yes.  Part 2: List	All of Your NONPRIORIT	V Uncoured Claims				
	itors have nonpriority unsec					
				1.1.		
_	lave nothing to report in this p	art. Submit this form to the court wit	n your otner sche	edules.		
Yes.						
unsecured cla	aim, list the creditor separately	aims in the alphabetical order of the year claim. For each claim lists is the other creditors in Part 3.If you	ed, identify what t	ype of claim it is. Do not list cla	aims already incl	uded in Part 1. If more
						Total claim
	ted Credit Serv	Last 4 digits of ac	count number	1636		\$68.00
•	ity Creditor's Name	When wee the del	h4 ima	Onened 09/46	<del>-</del>	
	x 7739 ester, MN 55903	When was the del	ot incurred?	Opened 08/16		
Number	Street City State Zlp Code	As of the date you	u file, the claim i	s: Check all that apply		
Who inc	curred the debt? Check one.					
Debt	or 1 only	☐ Contingent				
☐ Debt	or 2 only	☐ Unliquidated				
☐ Debt	or 1 and Debtor 2 only	☐ Disputed				
☐ At lea	ast one of the debtors and and	other Type of NONPRIC	RITY unsecured	d claim:		
☐ Chec	ck if this claim is for a comr	munity				
debt	aim aubiant to affact?	3		ration agreement or divorce th	at you did not	
	aim subject to offset?	report as priority cl		g plans, and other similar debt	·c	
No		☐ Debts to pension				
☐ Yes		Other. Specify	Selection A	Attorney Health Care (	JIINICS Of	

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Debtor 1 Kristin M. Dean Case number (if know) 4.2 Capital One Last 4 digits of account number 4482 \$5,641.00 Nonpriority Creditor's Name Opened 07/01 Last Active 15000 Capital One Dr When was the debt incurred? 11/05/15 Richmond, VA 23238 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Credit Card 4.3 Capital One Last 4 digits of account number 3507 \$1,172.00 Nonpriority Creditor's Name Opened 06/09 Last Active 15000 Capital One Dr When was the debt incurred? 11/05/15 Richmond, VA 23238 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only □ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes 4.4 Cavalry Portfolio Serv Last 4 digits of account number 6480 \$4.195.00 Nonpriority Creditor's Name Po Box 27288 When was the debt incurred? **Opened 03/17** Tempe, AZ 85285 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only □ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No

☐ Yes

■ Other. Specify Collection Attorney Citibank

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Debtor 1 Kristin M. Dean Case number (if know) 4.5 Chase Card Last 4 digits of account number 5597 \$3.590.00 Nonpriority Creditor's Name Opened 04/14 Last Active Po Box 15298 When was the debt incurred? 5/21/15 Wilmington, DE 19850 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Credit Card 4.6 Chase Mtg Last 4 digits of account number 7720 \$0.00 Nonpriority Creditor's Name Opened 3/23/01 Last Active Po Box 24696 When was the debt incurred? 3/31/14 Columbus, OH 43224 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only □ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts **FHA Real Estate Mortgage** ☐ Yes Other. Specify Deficiency Judgment, if any 4.7 Chicago-Kent College of Law Last 4 digits of account number 7605 \$642.49 Nonpriority Creditor's Name When was the debt incurred? Law Offices 565 W. Adams St., Ste. 600 Chicago, IL 60661 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No

☐ Yes

■ Other. Specify Attorney's fees

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Document Page 21 of 62 Debtor 1 Kristin M. Dean Case number (if know) 4.8 Citi-shell Last 4 digits of account number 9046 \$730.00 Nonpriority Creditor's Name Opened 07/16 Last Active Po Box 6497 When was the debt incurred? 8/13/17 Sioux Falls, SD 57117 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Credit Card 4.9 **Client Services** Last 4 digits of account number 9352 \$0.00 Nonpriority Creditor's Name When was the debt incurred? 3451 Harry S. Truman Blvd. Saint Charles, MO 63301-4047 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts Collection Citibank, N.A. acct. ending in 6833 ☐ Yes Other. Specify **Notice Only** 4.1 Comenity Bank/Ln Bryant 8400 \$373.90 Last 4 digits of account number Nonpriority Creditor's Name 4590 E. Broad St. When was the debt incurred? Columbus, OH 43213 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not

■ No

☐ Yes

■ Other. Specify Credit Card

report as priority claims

Debts to pension or profit-sharing plans, and other similar debts

Is the claim subject to offset?

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Document Page 22 of 62 Debtor 1 Kristin M. Dean Case number (if know) 4.1 Creditors Collection Bureau, Inc. 4308 \$92.61 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? P.O. Box 1022 Wixom, MI 48393-1022 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No Collection ☐ Yes Other. Specify **Associated Radiologists of Joliet** 4.1 **Creditors Discount & A** 8003 \$230.00 Last 4 digits of account number Nonpriority Creditor's Name 415 E Main St When was the debt incurred? **Opened 04/17** Streator, IL 61364 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts Collection Attorney Womens Primary ☐ Yes Other. Specify **Health Partners** 4.1 **ERC** 5407 \$0.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? P.O. Box 57610 Jacksonville, FL 32241 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another

☐ Yes

debt

■ No

Other. Specify Notice Only

☐ Obligations arising out of a separation agreement or divorce that you did not

TD Bank USA acct. ending in 3190

☐ Debts to pension or profit-sharing plans, and other similar debts

Collection

☐ Student loans

report as priority claims

☐ Check if this claim is for a community

Is the claim subject to offset?

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debt

■ No

☐ Obligations arising out of a separation agreement or divorce that you did not

**Factoring Company Account Comenity** 

Debts to pension or profit-sharing plans, and other similar debts

☐ Student loans

report as priority claims

Other. Specify Bank

☐ Check if this claim is for a community

Is the claim subject to offset?

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Debtor 1 Kristin M. Dean Case number (if know) 4.1 **Keynote Consulting** 2425 \$50.00 Last 4 digits of account number Nonpriority Creditor's Name 220 W Campus Dr Ste 102 When was the debt incurred? **Opened 10/14** Arlington Heights, IL 60004 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts **Collection Attorney Illinois** ☐ Yes Other. Specify Gastroenterology Grou 4.1 \$992.00 Kohls/capone 1612 Last 4 digits of account number 8 Nonpriority Creditor's Name Opened 05/11 Last Active N56 W 17000 Ridgewood Dr When was the debt incurred? 12/09/15 Menomonee Falls, WI 53051 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Charge Account ☐ Yes 4.1 5610 \$0.00 **MCM** Last 4 digits of account number 9 Nonpriority Creditor's Name 2365 Northside Dr. When was the debt incurred? Ste. 300 San Diego, CA 92108 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No Collection Comenity Bank acct. ending in 7615 Other. Specify ☐ Yes

**Notice Only** 

Document Page 25 of 62 Debtor 1 Kristin M. Dean Case number (if know) 4.2 **MCM** 9608 \$0.00 Last 4 digits of account number 0 Nonpriority Creditor's Name 2365 Northside Dr. When was the debt incurred? Ste. 300 San Diego, CA 92108 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No Collection Synchrony Bank acct. ending in 2709 ☐ Yes Other. Specify **Notice Only** 4.2 **Midland Funding** 9608 \$0.00 Last 4 digits of account number Nonpriority Creditor's Name 2365 Northside Dr Ste 30 When was the debt incurred? **Opened 11/16** San Diego, CA 92108 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt oxed Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts **Factoring Company Account Synchrony** Bank ☐ Yes Other. Specify Notice only 4.2 Midland Funding 5610 \$0.00 Last 4 digits of account number Nonpriority Creditor's Name 2365 Northside Dr Ste 30 **Opened 08/16** When was the debt incurred? San Diego, CA 92108 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No

Official Form 106 F/F

☐ Yes

Other. Specify

**Bank** 

**Notice only** 

**Factoring Company Account Comenity** 

Document Page 26 of 62 Debtor 1 Kristin M. Dean Case number (if know) 4.2 MRS Associates of New Jersey 0531 \$0.00 Last 4 digits of account number 3 Nonpriority Creditor's Name **1930 Olney** When was the debt incurred? Cherry Hill, NJ 08003 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts Collection Chase acct. ending in 5597 ☐ Yes Other. Specify **Notice Only** 4.2 C020 **NES of Ohio** \$0.00 Last 4 digits of account number Nonpriority Creditor's Name 2479 Edison Blvd. When was the debt incurred? Twinsburg, OH 44087-2340 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not debt Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No Collection Comenity Bank acct. ending in 6998 ☐ Yes Other. Specify **Notice Only** 4.2 **Portfolio Recovery Ass** 9599 \$2,957.00 Last 4 digits of account number 5 Nonpriority Creditor's Name 120 Corporate Blvd Ste 1 When was the debt incurred? **Opened 04/17** Norfolk, VA 23502 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims

☐ Yes

■ No

Other. Specify Bank

Debts to pension or profit-sharing plans, and other similar debts

**Factoring Company Account Synchrony** 

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Debtor 1 Kristin M. Dean Case number (if know) 4.2 **Portfolio Recovery Ass** 0161 \$1,882.00 Last 4 digits of account number 6 Nonpriority Creditor's Name 120 Corporate Blvd Ste 1 When was the debt incurred? **Opened 02/16** Norfolk, VA 23502 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No **Factoring Company Account Synchrony** ☐ Yes Other. Specify 4.2 9881 \$385.00 **Portfolio Recovery Ass** Last 4 digits of account number Nonpriority Creditor's Name 120 Corporate Blvd Ste 1 When was the debt incurred? **Opened 09/16** Norfolk, VA 23502 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Factoring Company Account Citibank N.A. Other. Specify 4.2 **Portfolio Recovery Associates** 9881 \$0.00 Last 4 digits of account number Nonpriority Creditor's Name 140 Corporate Blvd. When was the debt incurred? Norfolk, VA 23502 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts Collection Citibank, N.A. Home Depot

☐ Yes

■ Other. Specify Notice Only

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Debtor 1 Kristin M. Dean Case number (if know) 4.2 **Portfolio Recovery Associates** 9599 \$0.00 Last 4 digits of account number 9 Nonpriority Creditor's Name When was the debt incurred? 140 Corporate Blvd. Norfolk, VA 23502 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts Collection Synchrony Bank Amazon ☐ Yes Other. Specify **Notice only** 4.3 0177 \$796.29 Silver Cross Hospital Last 4 digits of account number 0 Nonpriority Creditor's Name P.O. Box 739 8/2016 When was the debt incurred? Moline, IL 61266-0739 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt oxed Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Medical Bill Other. Specify 4.3 State Collection Servi 4294 \$84.00 Last 4 digits of account number Nonpriority Creditor's Name 2509 S Stoughton Rd When was the debt incurred? **Opened 01/16** Madison, WI 53716 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Collection Attorney Acl Laboratories ☐ Yes

Document Page 29 of 62 Debtor 1 Kristin M. Dean Case number (if know) 4.3 Sunrise Credit Services, Inc. 1837 \$80.20 Last 4 digits of account number 2 Nonpriority Creditor's Name When was the debt incurred? P.O. Box 9100 Farmingdale, NY 11735-9100 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts Collection ☐ Yes Other. Specify AT&T U Verse 4.3 \$713.00 Td Bank Usa/targetcred 3431 Last 4 digits of account number Nonpriority Creditor's Name Opened 06/11 Last Active Po Box 673 When was the debt incurred? 12/09/15 Minneapolis, MN 55440 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $oxed{\square}$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes 4.3 **Unique National Collections** \$42.00 5724 Last 4 digits of account number Nonpriority Creditor's Name 119 E. Maple St. When was the debt incurred? Jeffersonville, IN 47130 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans  $\square$  Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims

■ No

☐ Yes

☐ Debts to pension or profit-sharing plans, and other similar debts

Collection

Other. Specify Oak Lawn Public Library

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ebtor 1 Kristin M. Dean		Case number (if know)	
Women's Primary Health Partners	Last 4 digits of account number	1016	\$230.41
Nonpriority Creditor's Name 12701 W. 143rd St. Ste. 230	When was the debt incurred?	7/2016	
Homer Glen, IL 60491-7725  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
☐ Yes	Other. Specify Medical Bil	<u> </u>	
Women's Primary Health Partners	Last 4 digits of account number	1016	\$428.31
Nonpriority Creditor's Name 12701 W. 143rd St. Ste. 230	When was the debt incurred?	3/2017	
Homer Glen, IL 60491-7725  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify Medical Bil	<u> </u>	
Women's Primary Health Partners	Last 4 digits of account number	1016	\$463.89
Nonpriority Creditor's Name 12701 W. 143rd St. Ste. 230	When was the debt incurred?	3/2017	
Homer Glen, IL 60491-7725  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
$\square$ Check if this claim is for a community debt	<ul><li>☐ Student loans</li><li>☐ Obligations arising out of a sepa</li></ul>	aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	-	
■ No	☐ Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	■ Other. Specify Medical Bil	I	

Part 3: List Others to Be Notified About a Debt That You Already Listed

<sup>5.</sup> Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you

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Debtor 1 Kristin M. Dean

Name and Address	On which entry in Part 1 or Part 2 d	
Blatt, Hasenmiller, et al. 10 S. LaSalle St.	Line 4.2 of (Check one):	Part 1: Creditors with Priority Unsecured Claims
Ste. 2200		■ Part 2: Creditors with Nonpriority Unsecured Claims
Chicago, IL 60603-1069		
	Last 4 digits of account number	0301
Name and Address	On which entry in Part 1 or Part 2 d	
Blatt, Hasenmiller, et al. 10 S. LaSalle St.	Line 4.3 of (Check one):	Part 1: Creditors with Priority Unsecured Claims
Ste. 2200		Part 2: Creditors with Nonpriority Unsecured Claims
Chicago, IL 60603-1069		
	Last 4 digits of account number	0381
Name and Address	On which entry in Part 1 or Part 2 d	id you list the original creditor?
Blitt & Gaines	Line 4.21 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
661 Glenn Ave.		■ Part 2: Creditors with Nonpriority Unsecured Claims
Wheeling, IL 60090	Last 4 digits of account number	1181
Name and Address  Cavalry	On which entry in Part 1 or Part 2 d Line <b>4.14</b> of (Check one):	id you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims
P.O. Box 520	Line 4.14 of (Check one).	Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
Valhalla, NY 10595		Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	6480
Name and Address	On which entry in Part 1 or Part 2 d	id you list the original creditor?
Codilis & Assoc. P.C.	Line 4.6 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
15W030 N. Frontage Rd. Ste. 100		■ Part 2: Creditors with Nonpriority Unsecured Claims
Willowbrook, IL 60527		
	Last 4 digits of account number	6717
Name and Address	On which entry in Part 1 or Part 2 d	id you list the original creditor?
Creditors Discounty & Audit Co.	Line 4.35 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
415 Main St.		■ Part 2: Creditors with Nonpriority Unsecured Claims
Streator, IL 61364	Last 4 digits of account number	5617
	0 111 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
Name and Address  Creditors Discounty & Audit Co.	On which entry in Part 1 or Part 2 d Line <b>4.36</b> of (Check one):	id you list the original creditor?  ☐ Part 1: Creditors with Priority Unsecured Claims
415 Main St.	Line 4100 of (Officer offe).	Part 2: Creditors with Nonpriority Unsecured Claims
Streator, IL 61364		• •
	Last 4 digits of account number	5617
Name and Address	On which entry in Part 1 or Part 2 d	
Creditors Discounty & Audit Co.	Line 4.37 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
415 Main St. Streator, IL 61364		Part 2: Creditors with Nonpriority Unsecured Claims
Streator, IL 01004	Last 4 digits of account number	5617
Name and Address	On which entry in Part 1 or Part 2 d	id you list the original creditor?
Financial Recovery Services, Inc.	Line 4.13 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
P.O. Box 385908		■ Part 2: Creditors with Nonpriority Unsecured Claims
Minneapolis, MN 55438-5908	Last 4 digits of account number	Z336
Name and Address	On which is a District District	
Name and Address  Medical Recovery Specialists, LLC	On which entry in Part 1 or Part 2 d Line <b>4.30</b> of ( <i>Check one</i> ):	id you list the original creditor?  ☐ Part 1: Creditors with Priority Unsecured Claims
INCUIVAL INCOCYCLY ODGULALISES. LLC	(555.1 6/10).	·
2250 E. Devon Ave.		Part 2: Creditors with Nonpriority Unsecured Claims
2250 E. Devon Ave. Ste. 352		■ Part 2: Creditors with Nonpriority Unsecured Claims
2250 E. Devon Ave.	Last 4 digits of account number	■ Part 2: Creditors with Nonpriority Unsecured Claims  6748

Part 4: Add the Amounts for Each Type of Unsecured Claim

Official Form 106 E/F

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Debtor 1 Kristin M. Dean

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				7	Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
				1	Total Claim
	6f.	Student loans	6f.	\$	0.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	26,427.08
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	26,427.08

		DUGUITIC	III FAU <del>C</del> 33 UFUZ	
Fill in this infor	mation to identify your	case:		
Debtor 1	Kristin M. Dean			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

### Official Form 106G

## **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	whom you have the r, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			
	City		State	ZIP Code	
2.2					
	Name				_
	Number	Street			_
	City		State	ZIP Code	<del>_</del>
2.3	•				
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.4					
	Name				_
	Number	Street			
	City		State	ZIP Code	
2.5					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
	,		0.0.0		

		Docume	ent Page 34 d	or 62	
Fill in this i	nformation to identify your	case:			
Debtor 1	Kristin M. Dean				
Dobtor 1	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing	) First Name	Middle Name	Last Name		
United State	es Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case numbe	or.				
(if known)	ਤ। 				☐ Check if this is an
					amended filing
o	- 40011				
Official	Form 106H				
Schedu	ale H: Your Cod	ebtors			12/15
our name a	and case number (if known) ou have any codebtors? (If	. Answer every question			o of any Additional Pages, write
<b>=</b>					
■ No □ Yes					
	in the last 8 years, have you , California, Idaho, Louisiana				y states and territories include
Alizona	, Calilottila, Idatio, Louisiatia	, Nevaua, New Mexico, Fu	ieito Rico, Texas, Wasii	ington, and wisconsin.)	
■ No. 0	Go to line 3.				
☐ Yes.	Did your spouse, former spo	use, or legal equivalent live	e with you at the time?		
in line 2	2 again as a codebtor only 0 06D), Schedule E/F (Officia	f that person is a guaran	tor or cosigner. Make	sure you have listed th	g with you. List the person shown ne creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
C	olumn 1: Your codebtor			Column 2: The cre	editor to whom you owe the debt
	ame, Number, Street, City, State and Z	IP Code		Check all schedule	•
				<b></b>	
3.1 N	ame			Schedule D, lin	
				☐ Schedule E/F, I☐ Schedule G, Iin	
_					e
	umber Street ity	State	ZIP Code		
O	ıty	Clate	Zii Gode		
				<b>-</b>	
3.2	ame			Schedule D, lin	
IN.	anie			☐ Schedule E/F, I	
				☐ Schedule G, lin	e
	umber Street	Ctoto	7ID Codo		
C	ity	State	ZIP Code		

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	to this to form of the form of the settle of								
	in this information to identify your optor 1  Kristin M. D								
Del	otor 2	can			_				
Uni	ted States Bankruptcy Court for the	e: NORTHERN DISTRIC	CT OF ILLINOIS						
	se number nown)					ed filing ent showing pos		chapter	
0	fficial Form 106I						as of the followi	ng date:	
	chedule I: Your Inc	ome				MM / DD/ Y	YYY		12/15
sup spo atta	as complete and accurate as pos plying correct information. If you use. If you are separated and you ch a separate sheet to this form.  Describe Employment	are married and not filing wi	ng jointly, and your sith you, do not include	spouse i de infori	s living nation a	with you, included in the with your spoot your spoot your spoot in the with	ude informatio ouse. If more s	n about pace is i	your needed,
1.	Fill in your employment information.		Debtor 1			Debtor 2	or non-filing	spouse	
	If you have more than one job,	Employment status	■ Employed			☐ Empl	☐ Employed		
	attach a separate page with information about additional	Employment status	☐ Not employed			☐ Not employed			
	employers.	Occupation	Nurse						
	Include part-time, seasonal, or self-employed work.	Employer's name	Advocate Christ Center	t Medic	al				
	Occupation may include student or homemaker, if it applies.	Employer's address	4440 95th Street Oak Lawn, IL 60						
		How long employed the	here? 11 year	s					
Par	t 2: Give Details About Mo	nthly Income							
spou If yo	mate monthly income as of the duse unless you are separated.  u or your non-filing spouse have m	ore than one employer, co	,	•	, ,	·	•	,	Ü
mor	e space, attach a separate sheet to	this form.							
					Fo	r Debtor 1	For Debtor non-filing s		
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	6,049.75	\$	N/A	
3.	Estimate and list monthly over	time pay.		3.	+\$	0.00	+\$	N/A	
4.	Calculate gross Income. Add li	ne 2 + line 3.		4.	\$	6,049.75	\$	N/A	

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Deb	tor 1	Kristin M. Dean		_	Case	number (if known)			
						Debtor 1	non-fili	otor 2 or ng spouse	
	Cop	by line 4 here		4.	\$	6,049.75	\$	N/A	
5.	List	all payroll deductions:							
	5a.	Tax, Medicare, and Social Secur	ty deductions	5a.	\$	1,297.14	\$	N/A	
	5b.	Mandatory contributions for reti	rement plans	5b.	\$	0.00	\$	N/A	
	5c.	Voluntary contributions for retire	•	5c.	\$	241.91	\$	N/A	
	5d.	Required repayments of retirement	ent fund loans	5d.	\$	298.65	\$	N/A	
	5e.	Insurance		5e.	\$_	342.27	\$	N/A	
	5f. 5g.	Domestic support obligations Union dues		5f. 5g.	\$_ \$	0.00	\$	N/A N/A	
	5y. 5h.	Other deductions. Specify: Dis	ahility	5y. 5h.+			+ \$	N/A	
	011.	Life Insurance (Child)	ability		<u> </u>	0.82	\$	N/A	
		Life Insurance			\$_	8.78	\$	N/A	
		Hyatt Legal Plan			\$	18.96	\$	N/A	
6.	Add	I the payroll deductions. Add lines	5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	2,209.40	\$	N/A	
7.	Calo	culate total monthly take-home pay	Subtract line 6 from line 4.	7.	\$	3,840.35	\$	N/A	
8.	8b. 8c. 8d. 8e. 8f.	regularly receive Include alimony, spousal support, of settlement, and property settlement Unemployment compensation Social Security Other government assistance th Include cash assistance and the value.	ty and business showing gross usiness expenses, and the total bu, a non-filing spouse, or a dependent child support, maintenance, divorce t.  at you regularly receive alue (if known) of any non-cash assistance to be perfect to the supplemental child supplement	8c. 8d. 8e.	\$\$ \$\$\$ \$\$\$	0.00 0.00 1,336.00 0.00 0.00	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	N/A N/A N/A N/A N/A	
	og.	rension of retirement income	Income from anticipated tax	og.	Ψ		· ——	NA	
	8h.	Other monthly income. Specify:	refunds	8h.+	\$	250.00	+ \$	N/A	
9.	Add	all other income. Add lines 8a+8b-	-8c+8d+8e+8f+8g+8h.	9.	\$	1,586.00	\$	N/A	
10.		culate monthly income. Add line 7 -		10. \$		5,426.35 + \$	N	\$5,4	26.35
11.	Inclu othe Do r	ude contributions from an unmarried per friends or relatives.	the expenses that you list in Schedul partner, members of your household, you ded in lines 2-10 or amounts that are no	ır depen			ed in <i>Sche</i>	edule J. 11. +\$	0.00
12.		e that amount on the Summary of Sc	ine 10 to the amount in line 11. The re hedules and Statistical Summary of Certa				a, if it	,	26.35
13.	Do y	you expect an increase or decrease No. Yes Explain:	e within the year after you file this form	n?				Combined monthly inc	ome

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				_			
Fill in th	is information to id	entify your case:					
Debtor 1	Kristi	n M. Dean			Chec	ck if this is:	
D 11 0					_	An amended filing	
Debtor 2 (Spouse,						A supplement show 13 expenses as of	ving postpetition chapter the following date:
``						·	
United S	tates Bankruptcy Cou	urt for the: NORT	HERN DISTRICT OF ILLIN	OIS		MM / DD / YYYY	
Case nui	mber						
(If known	n)						
Offic	ial Form 1	06.I					
	edule J: Y		nses				12/15
Be as c informa number	complete and acc ation. If more space r (if known). Answ	urate as possible ce is needed, att ver every question	e. If two married people ar ach another sheet to this				r supplying correct
Part 1:	Describe You this a joint case?	r Household					
	No. Go to line 2.						
	Yes. <b>Does Debto</b>	r 2 live in a sepa	rate household?				
	□ No	•					
		or 2 must file Offic	ial Form 106J-2, Expenses	for Separate House	hold of Deb	tor 2.	
2 <b>D</b> e			,	,			
	you have depen						
	o not list Debtor 1 a ebtor 2.	ınd ■ Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
Do	not state the						□ No
de	pendents names.			Daughter			Yes
							□ No
				Daughter			Yes
							□ No
				Daughter			Yes
							□ No
0 <b>D</b> -			_	Son			Yes
ex	your expenses i penses of people urself and your d	other than	No Yes				
Part 2:	Estimate You	r Ongoing Month	ly Expenses				
expens	te your expenses es as of a date af ble date.	as of your bank ter the bankrupt	ruptcy filing date unless y cy is filed. If this is a supp	ou are using this followed are using the following the fol	orm as a su J, check th	pplement in a Cha ne box at the top o	pter 13 case to report f the form and fill in the
the valu	ue of such assista		government assistance i cluded it on <i>Schedule I:</i> \			Vaur ave	
(Officia	l Form 106l.)					Your expe	511363
	e rental or home yments and any re		nses for your residence. I or lot.	nclude first mortgage	4. \$	3	1,625.00
lf r	not included in lin	ne 4:					
40	. Real estate tax	/AS			40 0	•	0.00
4a 4b		kes eowner's, or rente	r's insurance		4a. \$ 4b. \$		0.00 0.00
4c.			upkeep expenses		4c. \$		100.00
4d		association or cor			4d. \$		0.00
5 Ad	Iditional mortgag	e navments for v	our residence, such as ho	me equity loans	5 9		0.00

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Debtor 1 Kristi	n M. Dean	Case num	ber (if known)	
6. Utilities:				
	city, heat, natural gas	6a.	\$	0.00
	sewer, garbage collection	6b.	· -	0.00
	none, cell phone, Internet, satellite, and cable services	6c.	·	300.00
•	Specify:	6d.		0.00
	pusekeeping supplies	7.	·	1,200.00
	nd children's education costs	7. 8.	\$	· · · · · · · · · · · · · · · · · · ·
			·	100.00
	undry, and dry cleaning	9.	\$	250.00
	re products and services	10.	·	300.00
	dental expenses	11.	\$	250.00
	ion. Include gas, maintenance, bus or train fare. le car payments.	12.	\$	300.00
	nt, clubs, recreation, newspapers, magazines, and books	13.	·	150.00
	ontributions and religious donations	14.	•	0.00
5. Insurance.	ontributions and religious donations	14.	Ψ	0.00
	le insurance deducted from your pay or included in lines 4 or 20.			
15a. Life ins	, , ,	15a.	\$	49.00
15b. Health		15b.	·	0.00
15c. Vehicle		15b.	· ·	152.00
	insurance. Specify:	15d.	·	
	· · ·	13d.	Ψ	0.00
Specify:	ot include taxes deducted from your pay or included in lines 4 or 20.	16.	\$	0.00
	or lease payments: yments for Vehicle 1	17a.	¢	369.00
		17a. 17b.	·	
	yments for Vehicle 2			0.00
17c. Other.		17c.	·	0.00
17d. Other.		17d.	\$	0.00
	nts of alimony, maintenance, and support that you did not report as om your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I).		\$	0.00
	ents you make to support others who do not live with you.		\$	0.00
Specify:	, , , , , , , , , , , , , , , , , , , ,	19.	· -	
	roperty expenses not included in lines 4 or 5 of this form or on Sch	edule I: Yo	our Income.	
	nges on other property	20a.		0.00
20b. Real e	state taxes	20b.	\$	0.00
20c. Proper	ty, homeowner's, or renter's insurance	20c.	\$	0.00
•	nance, repair, and upkeep expenses	20d.	·	0.00
	owner's association or condominium dues	20e.		0.00
		21.	·	
I. Other: Speci			Ψ	25.00
-	our monthly expenses		<b>C</b>	F 470.00
	s 4 through 21.		\$	5,170.00
22b. Copy lin	e 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
22c. Add line	22a and 22b. The result is your monthly expenses.		\$	5,170.00
3. Calculate vo	our monthly net income.			
	ine 12 (your combined monthly income) from Schedule I.	23a.	\$	5,426.35
	your monthly expenses from line 22c above.	23b.	·	5,170.00
200. Oupy )	The manuary expenses from the ZZO above.	200.	<b>*</b>	3,170.00
	ct your monthly expenses from your monthly income.	00.5	e e	256.35
The re	sult is your monthly net income.	23c.	\$	250.55
4. Do you expe	ect an increase or decrease in your expenses within the year after y	ou file this	form?	
For example, o	lo you expect to finish paying for your car loan within the year or do you expect you			se or decrease because o
	the terms of your mortgage?			
■ No.				
☐ Yes.	Explain here:			

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Fill in this infor	mation to identify your	case:			
Debtor 1	Kristin M. Dean				
Debter 1	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)				_	Check if this is an mended filing
You must file the obtaining mone	is form whenever you fi	n connection with a bank	or amended schedules	rrect information. s. Making a false statement, conc in fines up to \$250,000, or impris	
Sig	n Below				
Did you pa	ay or agree to pay some	one who is NOT an attori	ney to help you fill out I	bankruptcy forms?	
■ No					
☐ Yes.	Name of person			Attach Bankruptcy Petiti  Declaration, and Signate	
	alty of perjury, I declare re true and correct.	that I have read the sumi	mary and schedules file	ed with this declaration and	
X /e/ Kri	stin M. Dean		X		
	n M. Dean		Signature of	Debtor 2	
	ire of Debtor 1		Ü		
Date	August 31, 2017		Date		

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		nation to identify you	r case:			
De	ebtor 1	Kristin M. Dean First Name	Middle Name	Last Name		
1 -	ebtor 2					
(Sp	ouse if, filing)	First Name	Middle Name	Last Name		
Un	ited States Ba	nkruptcy Court for the:	NORTHERN DISTRICT (	OF ILLINOIS		
1	ase number					Check if this is an amended filing
	fficial Fo		Affairs for Indivi	duals Filing for E	Bankruptcy	4/10
info	ormation. If m	ore space is needed, n). Answer every que		this form. On the top of ar		
			arital Status and Where You	Liveu belore		
1.	What is you	r current marital statu	is?			
	☐ Married					
	■ Not mar	ried				
2.	During the la	ast 3 years, have you	lived anywhere other than	where you live now?		
	□ No					
	Yes. Lis	t all of the places you l	ived in the last 3 years. Do no	ot include where you live no	W.	
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior A	ddress:	Dates Debtor 2 lived there
	9904 S. Pเ Oak Lawn		From-To: 4/2015 to 2/20	☐ Same as Debtor	1	☐ Same as Debtor 1 From-To:
<b>3.</b> sta	tes and territor	ies include Arizona, Ca	ver live with a spouse or leg lifornia, Idaho, Louisiana, Ne medule H: Your Codebtors (O	vada, New Mexico, Puerto F		
Pa	rt 2 Explai	n the Sources of You	r Income			
4.	Fill in the tota	al amount of income yo	nployment or from operatin u received from all jobs and a have income that you receiv	all businesses, including par	t-time activities.	endar years?
	□ No ■ Yes. Fill	I in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$44,392.84	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

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Case number (if known) Debtor 1 Kristin M. Dean

	Debtor 1		Debtor 2	
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that app	
For last calendar year: (January 1 to December 31, 2016)	■ Wages, commissions, bonuses, tips	\$61,854.00	☐ Wages, commis	ssions,
	☐ Operating a business		Operating a but	siness
For the calendar year before that: (January 1 to December 31, 2015)	■ Wages, commissions, bonuses, tips	\$60,992.00	☐ Wages, commis	ssions,
	☐ Operating a business		Operating a bu	siness
<ul> <li>Did you receive any other incollection include income regardless of whe and other public benefit payments winnings. If you are filing a joint of List each source and the gross in No</li> <li>Yes. Fill in the details.</li> </ul>	ether that income is taxable. Exis; pensions; rental income; interase and you have income that y	amples of other income are al rest; dividends; money collect you received together, list it or	ed from lawsuits; roy nly once under Debt	yalties; and gambling and lottery or 1.
	Debtor 1		Debtor 2	
	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of incomposition Describe below.	Gross income (before deductions and exclusions)
From January 1 of current year unt the date you filed for bankruptcy:	il Child Support	\$10,688.00		
For last calendar year: (January 1 to December 31, 2016)	Child Support	\$16,032.00		
For the calendar year before that: (January 1 to December 31, 2015)	Child Support	\$6,680.00		
6. Are either Debtor 1's or Debtor  ☐ No. Neither Debtor 1 nor	•	r debts? umer debts. Consumer debts	are defined in 11 U.	S.C. § 101(8) as "incurred by an
During the 90 days be ☐ No. Go to line	efore you filed for bankruptcy, di	id you pay any creditor a total	of \$6,425* or more?	)
☐ Yes List below paid that	veach creditor to whom you pal creditor. Do not include paymer le payments to an attorney for t	nts for domestic support obliga		
	ent on 4/01/19 and every 3 year		or after the date of a	djustment.
	or both have primarily consustore you filed for bankruptcy, di		of \$600 or more?	
☐ No. Go to line	÷7.			
Yes List below include page 1	v each creditor to whom you pa			u paid that creditor. Do not o, do not include payments to an
Creditor's Name and Address	Dates of payme	ent Total amount paid	Amount you V	Was this payment for

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Case number (if known) Document Debtor 1 Kristin M. Dean

	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this pa	yment for
	Toyota Motor Credit 1111 W 22nd St Ste 420 Oak Brook, IL 60523	June, July, and August 2017	\$1,107.00	\$14,470.00	☐ Mortgage ■ Car ☐ Credit Ca ☐ Loan Rep ☐ Suppliers ☐ Other	ard payment
7.	Within 1 year before you filed for bankrupto Insiders include your relatives; any general pa of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony.	rtners; relatives of any ger control, or owner of 20% of	neral partners; partners partners or more of their voting	erships of which yo g securities; and a	u are a genera ny managing a	al partner; corporations gent, including one for
	<ul><li>■ No</li><li>□ Yes. List all payments to an insider.</li></ul>					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
8.	Within 1 year before you filed for bankruptoinsider? Include payments on debts guaranteed or cos  No Yes. List all payments to an insider		ments or transfer a	any property on a	ccount of a de	ebt that benefited an
	Insider's Name and Address	Dates of payment	Total amount	Amount you		this payment
	t 4: Identify Legal Actions, Repossession		paid	still owe	Include cred	itor's name
9.	Within 1 year before you filed for bankrupto List all such matters, including personal injury modifications, and contract disputes.  No Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of th	e case
	Midland Funding v. Kristin Dean 17 M5 004387	Collection	Circuit Court o County - 5th 10220 S. 76th A Bridgeview, IL	Ave.	■ Pending □ On appe □ Conclude	al
10.	Within 1 year before you filed for bankruptor. Check all that apply and fill in the details below.  No. Go to line 11.  Yes. Fill in the information below.		erty repossessed, f	oreclosed, garnis	shed, attached	I, seized, or levied?
	Creditor Name and Address	Describe the Property  Explain what happene	d	Date		Value of the property
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment beca ■ No ■ Yes. Fill in the details.	etcy, did any creditor, inc		nancial institution	ı, set off any a	mounts from your
	Creditor Name and Address	Describe the action the	e creditor took	Date taker	action was	Amount

Case 17-26398 Filed 08/31/17 Entered 08/31/17 20:41:05 Document Page 43 of 62 Case number (if known) Debtor 1 Kristin M. Dean 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? ☐ Yes Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Value Dates you gave the gifts per person Person to Whom You Gave the Gift and Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? ■ No Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value more than \$600 contributed Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? Nο Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of **Address** transferred or transfer was payment **Email or website address** made Person Who Made the Payment, if Not You \$1,500.00 The Law Offices of Anna Stanley **Attorney Fees** as of Kahriman confirmation 4544 W. 103rd St. Ste. 102 Oak Lawn, IL 60453 **Hyatt Legal Plan** 8/28/17 \$310.00 The Law Offices of Anna Stanley **Attorney Fees** Kahriman 4544 W. 103rd St. Ste. 102

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Oak Lawn, IL 60453

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Debtor 1 Kristin M. Dean

<ul> <li>17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone promised to help you deal with your creditors or to make payments to your creditors?</li> <li>Do not include any payment or transfer that you listed on line 16.</li> <li>No</li> <li>Yes. Fill in the details.</li> </ul>			erty to anyone who					
	Person Who Was Paid Address	Description and valu transferred	e of any proper	Date payment or transfer was made	Amount of payment			
18.	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?  Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.  No  Yes. Fill in the details.							
	Person Who Received Transfer Address Person's relationship to you	Description and valu property transferred	e of	Describe any property or payments received or debts paid in exchange	Date transfer was made			
19.	Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)  No  Yes. Fill in the details.							
	Name of trust	Description and valu	e of the propert	y transferred	Date Transfer was made			
	List of Certain Financial Accounts, Instru		,		rour bonofit alocad			
	Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.  No  Yes. Fill in the details.							
	Name of Financial Institution and Las	•	/pe of account o strument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer			
21.	Do you now have, or did you have within 1 year cash, or other valuables?  No Yes, Fill in the details.	before you filed for ba	nkruptcy, any s	afe deposit box or other depos	itory for securities,			
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had access Address (Number, Street State and ZIP Code)		scribe the contents	Do you still have it?			
22.	Have you stored property in a storage unit or pl ■ No □ Yes. Fill in the details.	lace other than your ho	me within 1 yea	r before you filed for bankrupt	cy?			
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had to it? Address (Number, Street State and ZIP Code)		scribe the contents	Do you still have it?			

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Debtor 1 Kristin M. Dean

Pai	t 9: Identify Property You Hold or Control for	Someone Else						
23.	Do you hold or control any property that someofor someone.	one else owns? Include any proper	ty you borrowed from, are storing fo	r, or hold in trust				
	■ No □ Yes. Fill in the details.							
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value				
Pai	t 10: Give Details About Environmental Information	ation						
For	the purpose of Part 10, the following definitions	apply:						
	Environmental law means any federal, state, or toxic substances, wastes, or material into the a regulations controlling the cleanup of these sul	ir, land, soil, surface water, ground	- ·					
	Site means any location, facility, or property as to own, operate, or utilize it, including disposal		law, whether you now own, operate,	or utilize it or used				
	Hazardous material means anything an environ hazardous material, pollutant, contaminant, or s		s waste, hazardous substance, toxic	substance,				
Rep	ort all notices, releases, and proceedings that yo	ou know about, regardless of wher	n they occurred.					
24.	Has any governmental unit notified you that you	u may be liable or potentially liable	under or in violation of an environm	ental law?				
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice				
25.	Have you notified any governmental unit of any release of hazardous material?							
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice				
26.	Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.							
	■ No □ Yes. Fill in the details.							
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case				
Pai	t 11: Give Details About Your Business or Con	nections to Any Business						
27.	Within 4 years before you filed for bankruptcy,	Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?						
	☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time							
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)							
	☐ A partner in a partnership							
	☐ An officer, director, or managing execut	tive of a corporation						
	☐ An owner of at least 5% of the voting or equity securities of a corporation							

Entered 08/31/17 20:41:05 Case 17-26398 Doc 1 Filed 08/31/17 Document Page 46 of 62 Case number (if known) Debtor 1 Kristin M. Dean No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business **Employer Identification number Business Name Address** Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper **Dates business existed** Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. Name **Date Issued** Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Kristin M. Dean Signature of Debtor 2 Kristin M. Dean Signature of Debtor 1 Date Date August 31, 2017

Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?

■ No

☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

■ No

 $\square$  Yes. Name of Person \_\_\_\_\_. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure</a>.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

### UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

## RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

### (Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtor and the attorney that conflicts with this agreement is void.

### A. BEFORE THE CASE IS FILED

### THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

#### THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.

- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

### B. AFTER THE CASE IS FILED

### THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce).
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

#### THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor, in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

## C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

### D. RETAINERS AND PREVIOUS PAYMENTS

1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.

□The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:

- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the Chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;

- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the Chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

### E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. *Improper conduct by the debtor*. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

[Remaining page intentionally left blank.]

### F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$0.00.
- 2. In addition, the debtor will pay the filing fee required in the case and other expenses of \$310.00.
- 3. Before signing this agreement, the attorney has received, \$0.00 toward the flat fee, leaving a balance due of \$0.00; and \$0.00 for expenses, leaving a balance due for the filing fee of \$0.00.
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

Date: August 31, 2017	
Signed:	
/s/ Kristin M. Dean	/s/ Anna Stanley Kahriman
Kristin M. Dean	Anna Stanley Kahriman 6287467
	Attorney for the Debtor(s)
Debtor(s)	
Do not sign this agreement if the amo	ounts are blank.

**Local Bankruptcy Form 23c** 

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B2030 (Form 2030) (12/15)

### **United States Bankruptcy Court** Northern District of Illinois

In	re Kristin M. Dean		Case No.			
		Debtor(s)	Chapter	13		
	DISCLOSURE OF COMPEN	NSATION OF ATTO	RNEY FOR D	EBTOR(S)		
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(compensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation of	g of the petition in bankruptcy	, or agreed to be paid	I to me, for services rea	ndered or to	
	For legal services, I have agreed to accept		\$	0.00		
	Prior to the filing of this statement I have received		\$	0.00		
	Balance Due			0.00		
2.	The source of the compensation paid to me was:					
	■ Debtor □ Other (specify):					
3.	The source of compensation to be paid to me is:					
	■ Debtor □ Other (specify):					
4.	■ I have not agreed to share the above-disclosed compe	ensation with any other persor	unless they are men	nbers and associates of	my law firm.	
	☐ I have agreed to share the above-disclosed compensa copy of the agreement, together with a list of the name				w firm. A	
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:					
	<ul> <li>a. Analysis of the debtor's financial situation, and render</li> <li>b. Preparation and filing of any petition, schedules, state</li> <li>c. Representation of the debtor at the meeting of credito</li> <li>d. [Other provisions as needed]</li> <li>Negotiations with secured creditors to reaffirmation agreements and application</li> <li>522(f)(2)(A) for avoidance of liens on hou</li> </ul>	ement of affairs and plan which rs and confirmation hearing, a educe to market value; ex ns as needed; preparation	h may be required; and any adjourned he	arings thereof;	iling of	
6.	By agreement with the debtor(s), the above-disclosed fee Representation of the debtors in any dis any other adversary proceeding.	does not include the following	g service: licial lien avoidand	es, relief from stay	actions or	
		CERTIFICATION				
this	I certify that the foregoing is a complete statement of any s bankruptcy proceeding.	agreement or arrangement for	or payment to me for	representation of the de	ebtor(s) in	
-	August 31, 2017  Date	Signature of Attorn The Law Offices 4544 W. 103rd S Ste. 102 Oak Lawn, IL 60	hriman 6287467 $_{ey}$ of Anna Stanley I t.		_	
		Name of law firm	( /			

### United States Bankruptcy Court Northern District of Illinois

In re	Kristin M. Dean		Case No.		
		Debtor(s)	Chapter	13	
	VI	ERIFICATION OF CREDITOR N	MATRIX		
		Number of Creditors:			
	The above-named Debtor(s (our) knowledge.	) hereby verifies that the list of cred	litors is true and	correct to the best of my	

Affiliated Credit Serv Po Box 7739 Rochester, MN 55903

Blatt, Hasenmiller, et al. 10 S. LaSalle St. Ste. 2200 Chicago, IL 60603-1069

Blitt & Gaines 661 Glenn Ave. Wheeling, IL 60090

Capital One 15000 Capital One Dr Richmond, VA 23238

Cavalry P.O. Box 520 Valhalla, NY 10595

Cavalry Portfolio Serv Po Box 27288 Tempe, AZ 85285

Chase Card Po Box 15298 Wilmington, DE 19850

Chase Mtg Po Box 24696 Columbus, OH 43224

Chicago-Kent College of Law Law Offices 565 W. Adams St., Ste. 600 Chicago, IL 60661

Citi-shell Po Box 6497 Sioux Falls, SD 57117

Client Services 3451 Harry S. Truman Blvd. Saint Charles, MO 63301-4047 Codilis & Assoc. P.C. 15W030 N. Frontage Rd. Ste. 100 Willowbrook, IL 60527

Comenity Bank/Ln Bryant 4590 E. Broad St. Columbus, OH 43213

Creditors Collection Bureau, Inc. P.O. Box 1022 Wixom, MI 48393-1022

Creditors Discount & A 415 E Main St Streator, IL 61364

Creditors Discounty & Audit Co. 415 Main St. Streator, IL 61364

ERC P.O. Box 57610 Jacksonville, FL 32241

Financial Recovery Services, Inc. P.O. Box 385908
Minneapolis, MN 55438-5908

Harris & Harris 111 W. Jackson Blvd. Ste. 400 Chicago, IL 60604-4135

Jh Portfolio Debt Equi 5757 Phantom Dr Ste 225 Hazelwood, MO 63042

Keynote Consulting 220 W Campus Dr Ste 102 Arlington Heights, IL 60004

Kohls/capone N56 W 17000 Ridgewood Dr Menomonee Falls, WI 53051 MCM 2365 Northside Dr. Ste. 300 San Diego, CA 92108

Medical Recovery Specialists, LLC 2250 E. Devon Ave. Ste. 352
Des Plaines, IL 60018-4521

Midland Funding 2365 Northside Dr Ste 30 San Diego, CA 92108

MRS Associates of New Jersey 1930 Olney Cherry Hill, NJ 08003

NES of Ohio 2479 Edison Blvd. Twinsburg, OH 44087-2340

Portfolio Recovery Ass 120 Corporate Blvd Ste 1 Norfolk, VA 23502

Portfolio Recovery Associates 140 Corporate Blvd. Norfolk, VA 23502

Silver Cross Hospital P.O. Box 739 Moline, IL 61266-0739

State Collection Servi 2509 S Stoughton Rd Madison, WI 53716

Sunrise Credit Services, Inc. P.O. Box 9100 Farmingdale, NY 11735-9100

Td Bank Usa/targetcred Po Box 673 Minneapolis, MN 55440

Toyota Motor Credit 1111 W 22nd St Ste 420 Oak Brook, IL 60523

Unique National Collections 119 E. Maple St. Jeffersonville, IN 47130

Women's Primary Health Partners 12701 W. 143rd St. Ste. 230 Homer Glen, IL 60491-7725